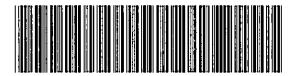
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(Requestor's Name)
(Address)
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PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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T. MATTHEWS

APR - 1 2022

COVER LETTER

TO: Registration Se Division of Co					
RR Engine					
SUBJECT:		ited Liability Company			
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.			
Please return all correspo	ondence concerning this matter	to the following:			
	T. Hunter Stahl				
		Name of Person			
	Threlkeld Law, P.A.				
		Firm/Company			
	3003 Tamiami Trail N., St	uite 400			
		Address			
	Naples, FL 34103				
	 -	City/State and Zip Code			
	hunter@napleslegal.net	to be used for future annual report no	and Canadian V		
For further information of	e-mail address: (omeanon)		
T. Hunter Stahl		239 234-5034			
Name o	of Person	Area Code Days	ime Telephone Number		
Enclosed is a check for t	the following amount:				
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)		
Mailing Address: Registration Section		Street Address: Registration S	Section		
Division of Corporations		Division of C	Division of Corporations		
P.O. Box 633		The Centre of			
Tallahassee,	FL 32314	2415 N. Mon	roe Street, Suite 810		

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

RR Engineering LLC (Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on February 23, 2022 and assigned Florida document number 1.22000096765 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Laura Green	2851 Via Piazza Loop	= Add
		Fort Myers, FL 33905	
			□Change
			□ Add
			□ Remove
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(If an eff Note:	fective date is listed, the If the date inserted in	an the date of filing date must be specific and a this block does not a n the Department of S	cannot be prior to d neet the applicable	ate of filing or more the statutory filing requ	(optional) an 90 days after filing.) Purs airements, this date will	uant to 605.0207 (3 not be listed as th
he recor ord is fi		effective date, but not	an effective time.	at 12:01 a.m. on the	e earlier of: (b) The 90t	h day after the
Dated	March 15		2022	,		
			11/1	8		

Typed or printed name of signee